INFORMATION DISCLOSURE STATEMENT BY APPLICANT

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| Application Number | 09/849,152 | | | |
| Filing Date | May 4, 2001 | | | |
| First Named Inventor | McCann, et. al. | | | |
| Art Unit | 2872 | | | |
| Examiner Name | Denise S. Allen | | | |
| Attorney Docket Number | 1016.0066 | | | |

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| Examiner | 1 | PLV | Date | 11.21. |
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| Signature | Les | Por 1211-0112 | Considered | 1112127 |
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Denise S. Allen

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control of the Complete if Known Complete if Known Substitute for form 1449/PTO Application Number 09/849,152 JUN 25 May 4, 2001 Filing Date INFORMATION DISCLOSURE First Named Inventor McCann, et. al. STATEMENT BY APPLICANT Art Unit 2872 TECH CENTER 2000

Examiner Name

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| Signature | | ردوکا درج | 121 FAVIT | Considered | 1112107 |

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| Application Number | 09/849,152 | |
| Filing Date | May 4, 2001 | |
| First Named Inventor | Peter R. McCANN | |
| Art Unit | 2872 | |
| Examiner Name | Denise S. Allen | |
| Attorney Docket Number | 1016.0066 | |

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| Examiner Signature | Les | Bouts Karis | Date Considered | 1/13/05 |

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| STA | (Use as many sheets as necessary) | PPLICANT | First Named Inventor | Peter R. McCANN | |
| | | | Art Unit | 2872 | |
| | (Use as many si | ieeis as i | | Examiner Name | Denise S. Allen |
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| Examiner Initials* | Cite No.1 | Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published. | T ² |
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